

**2017 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F16000003691

**Entity Name:** CHAPLAIN USA INCORPORATED**Current Principal Place of Business:**600 FISK AVENUE #125  
BROWNWOOD, TX 76801**Current Mailing Address:**10436 US HWY 19 N  
PORT RICHEY, FL 34668 US**FEI Number: 81-2614196****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**NAWALANY, MICHAEL  
1880 N CONGRESS AVE #220  
BOYNTON BCH, FL 33426 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:**\_\_\_\_\_  
Electronic Signature of Registered Agent\_\_\_\_\_  
Date**Officer/Director Detail :**

Title	SECRETARY, TREASURER
Name	LECONTE, PHIL
Address	1104 W 7TH ST
City-State-Zip:	AUSTIN TX 78703

Title	PRESIDENT
Name	FAIR, DAVID
Address	1026 SANTA CLARA
City-State-Zip:	BROWNWOOD TX 76801

Title	D
Name	TOOPES, ANDREW
Address	334 SYLVN CIR
City-State-Zip:	BOWLING GREEN KY 42101

Title	DIRECTOR
Name	MORGAN, TERRY
Address	3768 MAGNOLIA STREET
City-State-Zip:	LOOMIS CA 95650

Title	DIRECTOR
Name	MARIE, BETCHER
Address	600 FISK AVENUE #125
City-State-Zip:	BROWNWOOD TX 76801

Title	OTHER
Name	MCGHAY, BRIAN
Address	10436 US HWY 19 N
City-State-Zip:	PORT RICHEY FL 34668

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: PHIL LECONTE****SEC/TREAS****01/26/2017**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date